

**City of New Carrollton Community Garden
Release of All Claims**

I, _____, am a participant in the City of New Carrollton Community Garden. As a condition of being allowed to participate in the City of New Carrollton Community Garden, I agree to the following:

1. I am duly aware of the risks and hazards that may arise through participation in the City of New Carrollton Community Garden, and assume any expenses and liabilities I incur in the event of an accident, illness or other incapacity. If I have had any questions about the City of New Carrollton Community Garden, its nature, risks or hazards, I have contacted the Garden Manager and City Horticulturalist and discussed those questions with them to my satisfaction.

2. In consideration of being granted the opportunity to participate in the City of New Carrollton Community Garden, I, for myself, my executors, administrators, agents and assigns do hereby release and forever discharge the City of New Carrollton, City of New Carrollton employees, the City of New Carrollton Community Garden Manager, volunteers, and other gardeners from all claims of damages, demands, and any actions whatsoever, including those based on negligence, in any manner arising out of my participation in this activity; there is no action against the City of New Carrollton for the actions of any of its employees or agents whether negligent or not. I understand that this Release means that, among other things, I am giving up my right to sue for any such losses, damages, injury or costs that I may incur.

I represent and certify that my true age is either at least 18 years old or, if I am under 18 years old on this date, my parent or legal guardian has read and signed this form. I have read this entire Release, fully understand it, and I agree to be legally bound by it.

Participant's Signature _____

Printed Name _____ Date _____

Parent/Guardian's Signature _____

Printed Name _____ Date _____